

# Ovarian cancer surgery outcomes studied

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The introduction of optimal surgery in the treatment of advanced ovarian cancer in order to achieve complete cytoreduction has had the main objective of increasing survival and providing a definitive diagnosis for patients that will allow some cases to be cured. However, it is highly aggressive and often presents serious post-operative complications that

can cause an increase in patient mortality and the delay or impossibility of adjuvant oncological treatment.

Researchers from the Multidisciplinary Unit for Abdomino-Pelvic Oncology Surgery, the Surgery and Radiology services of the University General Hospital of Castelló and the Predepartmental Unit of Medicine of the Universitat Jaume I, with the collaboration of researchers from the Foundation of the University General Hospital of Valencia, the University of Valencia and the University of Texas have carried out a retrospective study of the patients treated at this health center on one of the complications causing the greatest morbidity and mortality, gastrointestinal fistula (GIF). The article has been published in the journal *Cancer Management and Research*.

The researchers of the UMCOAP group, made up of staff from the Multidisciplinary Unit for Abdomino-Pelvic Oncology Surgery of the University General Hospital of Castelló and the Predepartmental Medicine Unit of the Universitat Jaume I, together with professionals from the Obstetrics and Gynecology, Anaesthesiology and Surgery services at the same [hospital](#) have drawn up a list of clinical standards for advanced ovarian cancer [surgery](#) (AOCS) that enables professionals to evaluate the quality of treatment, to consider aspects that need to be improved and to compare their work with other teams.

The work "Outcome quality standards in advanced ovarian cancer surgery," published in the *World Journal of Surgical Oncology*, includes a review of a total of 38 studies and favors, given the complexity of advanced ovarian [cancer](#) surgery, that medical and surgical staff have additional quality indicators to determine what can be considered optimal or sub-optimal treatment. The indicators have been selected according to their clinical relevance (factors that clearly influenced the prognosis or the post-operative course) and the frequency of occurrence in the different studies to ensure a sufficient amount of data for

evaluation.

**More information:** Antoni Lluca et al. Postoperative Intestinal Fistula in Primary Advanced Ovarian Cancer Surgery, *Cancer Management and Research* (2021). [DOI: 10.2147/CMAR.S280511](https://doi.org/10.2147/CMAR.S280511)

Outcome quality standards in advanced ovarian cancer surgery, *World Journal of Surgical Oncology* (2020). [DOI: 10.1186/s12957-020-02064-7](https://doi.org/10.1186/s12957-020-02064-7)

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